



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/654,444	<b>FILING DATE</b> 09/01/2000 <b>RULE</b> -	<b>CLASS</b> 379	<b>GROUP ART UNIT</b> 2642	<b>ATTORNEY DOCKET NO.</b> CGTES.0143
<b>APPLICANTS</b> Stephen Paul Brennan, Bedford, TX ; James Ralph Bradford, Odessa, FL ;  <b>** CONTINUING DATA *****</b> none <i>HA</i> <b>** FOREIGN APPLICATIONS *****</b> none <i>HA</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 10/21/2000</b> -				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>HA</i> Examiner's Signature <i>HA</i> Initials <i>HA</i>		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 26
			<b>INDEPENDENT CLAIMS</b> 7	
<b>ADDRESS</b>  Leonard Charles Suchyta GTE Service Corporation 600 Hidden Ridge HQE03G13 Irving, TX 75038-3809				
<b>TITLE</b> Method and apparatus for determining the carrier used for an AIN call				
<b>FILING FEE RECEIVED</b> 1162	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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## \*BIBDATASHEET\*

CONFIRMATION NO. 5740

Bib Data Sheet

SERIAL NUMBER 09/654,444	FILING DATE 09/01/2000  RULE	CLASS 379	GROUP ART UNIT 2642	ATTORNEY DOCKET NO. CGTES.0143
<b>APPLICANTS</b>  Stephen Paul Brennan, Bedford, TX;  James Ralph Bradford, Odessa, FL;  <b>** CONTINUING DATA *****</b>  <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/21/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR  COUNTRY TX	SHEETS  DRAWING 4	TOTAL  CLAIMS 26	INDEPENDENT  CLAIMS 7
<b>ADDRESS</b> 32127 VERIZON CORPORATE SERVICES GROUP INC. C/O CHRISTIAN R. ANDERSEN 600 HIDDEN RIDGE DRIVE MAILCODE HQEO3H14 IRVING , TX 75038				
<b>TITLE</b> Method and apparatus for determining the carrier used for an AIN call				
FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	